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APR 20 2006

PTO/SB/30 (08-04)

Approved for use through 07/31/2006. GMB 0551-0031  
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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**Request  
for  
Continued Examination (RCE)  
Transmittal**

**Address to:**  
Mail Stop RCE  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

|                        |                   |
|------------------------|-------------------|
| Application Number     | 09/312,351        |
| Filing Date            | 05/14/1999        |
| First Named Inventor   | Jon A. Wolff      |
| Art Unit               | 1632              |
| Examiner Name          | Joseph T. Woitach |
| Attorney Docket Number | MIRUS.006         |

This is a Request for Continued Examination (RCE) under 37 CFR 1.114 of the above-identified application.  
Request for Continued Examination (RCE) practice under 37 CFR 1.114 does not apply to any utility or plant application filed prior to June 8, 1995, or to any design application. See Instruction Sheet for RCEs (not to be submitted to the USPTO) on page 2.

- 1. Submission required under 37 CFR 1.114** Note: If the RCE is proper, any previously filed unentered amendments and amendments enclosed with the RCE will be entered in the order in which they were filed unless applicant instructs otherwise. If applicant does not wish to have any previously filed unentered amendment(s) entered, applicant must request non-entry of such amendment(s).

- b.  Previously submitted. If a final Office action is outstanding, any amendments filed after the final Office action may be considered as a submission even if this box is not checked.

- i.  Consider the arguments in the Appeal Brief or Reply Brief previously filed on \_\_\_\_\_  
ii.  Other \_\_\_\_\_

- b.  Enclosed

- |   |  |
|---|--|
| i. <input checked="" type="checkbox"/> Amendment/Reply    | III. <input type="checkbox"/> Information Disclosure Statement (IDS) |
| ii. <input type="checkbox"/> Affidavit(s)/ Declaration(s) | iv. <input type="checkbox"/> Other _____                             |

**2. Miscellaneous**

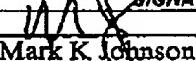
- a.  Suspension of action on the above-identified application is requested under 37 CFR 1.103(c) for a period of \_\_\_\_\_ months. (Period of suspension shall not exceed 3 months; Fee under 37 CFR 1.17(l) required)  
b.  Other \_\_\_\_\_

**3. Fees**

- The RCE fee under 37 CFR 1.17(e) is required by 37 CFR 1.114 when the RCE is filed.  
The Director is hereby authorized to charge the following fees, or credit any overpayments, to Deposit Account No. \_\_\_\_\_. I have enclosed a duplicate copy of this sheet.
- |  |                                     |
|--|-------------------------------------|
| I. <input type="checkbox"/> RCE fee required under 37 CFR 1.17(e)                      | 04/21/2006 TL0111 00000042 09312351 |
| II. <input type="checkbox"/> Extension of time fee (37 CFR 1.135 and 1.17)             | 82 FC:2801 395.00 OP                |
| III. <input type="checkbox"/> Other _____  |                                     |
| b. <input type="checkbox"/> Check in the amount of \$ _____ enclosed                   |                                     |
| c. <input checked="" type="checkbox"/> Payment by credit card (Form PTO-2038 enclosed) |                                     |

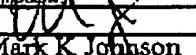
**WARNING:** Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

**SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT REQUIRED**

|                   |   |                  |            |
|-------------------|---|------------------|------------|
| Signature         |  | Date             | 04/20/2005 |
| Name (Print/Type) | Mark K. Johnson   | Registration No. | 35,909     |

**CERTIFICATE OF MAILING OR TRANSMISSION**

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Mail Stop RCE, Commissioner for Patents, P. O. Box 1450, Alexandria, VA 22313-1450 or facsimile transmitted to the U.S. Patent and Trademark Office on the date shown below.

Signature   
Name (Print/Type) Mark K. Johnson Date 04/20/2005

This collection of information is required by 37 CFR 1.114. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450, DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Mail Stop RCE, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.  
If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

P 3  
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APR 20 2006

PTO/SB/17 (01-06)

Approved for use through 07/31/2006. OMB 0651-0032

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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Fees pursuant to the Consolidated Appropriations Act, 2006 (H.R. 4816).

**FEE TRANSMITTAL  
For FY 2006** Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$)

395.00

**Complete if Known**

|                      |                    |
|----------------------|--------------------|
| Application Number   | 09/312,351         |
| Filing Date          | 05/14/1999         |
| First Named Inventor | Jon A. Wolff       |
| Examiner Name        | Woltach, Joseph T. |
| Art Unit             | 1632               |
| Attorney Docket No.  | Mirus 6.01         |

**METHOD OF PAYMENT (check all that apply)**

Check  Credit Card  Money Order  None  Other (please identify): \_\_\_\_\_

Deposit Account Deposit Account Number: \_\_\_\_\_ Deposit Account Name: \_\_\_\_\_

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

Charge fee(s) indicated below  Charge fee(s) indicated below, except for the filing fee

Charge any additional fee(s) or underpayments of fee(s)  Credit any overpayments

under 37 CFR 1.16 and 1.17

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

**FEES CALCULATION (All the fees below are due upon filing or may be subject to a surcharge.)****1. BASIC FILING, SEARCH, AND EXAMINATION FEES**

| Application Type | FILING FEES |                       | SEARCH FEES |                       | EXAMINATION FEES |                       | Fee Paid (\$) |
|------------------|-------------|-----------------------|-------------|-----------------------|------------------|-----------------------|---------------|
|                  | Fee (\$)    | Small Entity Fee (\$) | Fee (\$)    | Small Entity Fee (\$) | Fee (\$)         | Small Entity Fee (\$) |               |
| Utility          | 300         | 150                   | 500         | 250                   | 200              | 100                   | _____         |
| Design           | 200         | 100                   | 100         | 50                    | 130              | 65                    | _____         |
| Plant            | 200         | 100                   | 300         | 150                   | 160              | 80                    | _____         |
| Reissue          | 300         | 150                   | 500         | 250                   | 600              | 300                   | _____         |
| Provisional      | 200         | 100                   | 0           | 0                     | 0                | 0                     | _____         |

**2. EXCESS CLAIM FEES****Fee Description**

Each claim over 20 (including Reissues)

**Small Entity****Fee (\$)**

50 25

Each independent claim over 3 (including Reissues)

200 100

Multiple dependent claims

360 180

**Total Claims****Extra Claims** **Fee (\$)** **Fee Paid (\$)**

- 20 or HP = x = \_\_\_\_\_

HP = highest number of total claims paid for, if greater than 20.

**Multiple Dependent Claims****Fee (\$)**

Fee Paid (\$)

**Indep. Claims****Extra Claims** **Fee (\$)** **Fee Paid (\$)**

- 3 or HP = x = \_\_\_\_\_

HP = highest number of independent claims paid for, if greater than 3.

**3. APPLICATION SIZE FEE**

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

|              |              |  |          |               |
|--------------|--------------|--|----------|---------------|
| Total Sheets | Extra Sheets | Number of each additional 50 or fraction thereof | Fee (\$) | Fee Paid (\$) |
|--------------|--------------|--|----------|---------------|

- 100 = / 50 = (round up to a whole number) x = \_\_\_\_\_

**4. OTHER FEE(S)**

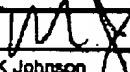
Non-English Specification, \$130 fee (no small entity discount)

**Fee Paid (\$)**

Other (e.g., late filing surcharge): RCE

395.00

**SUBMITTED BY**

|                   |   |  |                        |
|-------------------|---|--|------------------------|
| Signature         |  | Registration No. (Attorney/Agent) 35,809 | Telephone 608.238.4400 |
| Name (Print/Type) | Mark K. Johnson   |  | Date April 20, 2006    |

This collection of information is required by 37 CFR 1.135. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22315-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22315-1450.

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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

APR 20 2006

Application of: Jon A. Wolff, )  
Sean D. Monahan, James E. Hagstrom, )  
Paul M. Slattum, Vladimir G. Budker, )  
and David B. Rozema )  
Serial No.: 09/312,351 )  
Filed: 5/14/99 )  
Group Art Unit: 1632 )

Examiner: Joseph Woitach

For: A Compound Containing a Labile Disulfide Bond

AMENDMENT UNDER 37 C.F.R. §1.114

Commissioner of Patents  
PO BOX 1450  
Alexandria, VA 22313-1450

Dear Sir:

This letter is in response to the Office Action dated January 5, 2006.